

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO | DATE |
|---------------------------|-----------|--------|----------|
| FEE DETERMINATION | S.2 | | 06-20-01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | LT | 82708 | 7-6-01 |
| RESPONSE FORMALITY REVIEW | SA | JL1034 | 11/02/01 |
| | 1009-1776 | 954 | 3/6/02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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20/10/01
 11-02-01
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